☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$
1b. Copy line 62, Total personal property, from Schedule A/B	\$
1c. Copy line 63, Total of all property on Schedule A/B	\$
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$_ -
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$
Your total liabilities	\$ 0
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ 1.170 \$ 450)
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	<u>\$ 4500</u>

page 1 of 2

Ulun	hui
First Name	Middle Name



Case number	(if known)

Pa	rt 4: Answer These Questions for Administrative and Statistical Records	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this for Yes	
7.	What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an ifamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose. Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	03, 20 0,0,0, 3 1001
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	s 1,170
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim
	From Part 4 on Schedule E/F, copy the following:	
	9a. Domestic support obligations (Copy line 6a.)	\$ 0
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
	9d. Student loans. (Copy line 6f.)	\$_ 10,100 ·
CONTROL CONTRO	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$ <u> </u>
-	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$
	9g. Total. Add lines 9a through 9f.	s_10,100

Fill in this information to identify your case and this filing:		
Debtor 1 HUNNI	,	Hoffman
Debtor 2	Middle Name	Last Name
(Spouse, if filing) First Name	Middle Name	Last Name
United States Bankruptcy Court for the: _	Dis	trict of
Case number		

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

you own or have any legal or equitable interes	t in any residence, building, land, or similar prope	rty r	
No. Go to Part 2. Yes. Where is the property?	What is the property? Check all that apply. ☐ Single-family home	Do not deduct secured cla	I claims on Schedule D:
Street address, if available, or other description	☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land	Creditors Who Have Claim Current value of the entire property?	s Secured by Property.
City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as feet the entireties, or a life	simple, tenancy by
County	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this it property identification number:	Check if this is co (see instructions) em, such as local	mmunity property
you own or have more than one, list here: 1.2. Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property?	d claims on Schedule L ms Secured by Property
City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other Who has an interest in the property? Check one.	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by
County	 □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another 	Check if this is constructions)	ommunity property





Case number (if known)	
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1.3. CHOI 2037 St. E. Street address, if available, or other description Graham Wa 9837 State ZIP Cod	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other Who has an interest in the property? Check one.	Do not deduct secured clatte amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Describe the nature of interest (such as fee the entireties, or a life	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
TIECE County	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this its property identification number: r all of your entries from Part 1, including any entries		mmunity property
Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable inte	rest in any vehicles, whether they are registered or licle, also report it on Schedule G: Executory Contracts are ses, motorcycles	not? Include any vehicles	
3.1. Make: Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	Do not deduct secured claithe amount of any secured Creditors Who Have Claim Current value of the entire property? \$	claims on Schedule D: s Secured by Property.
If you own or have more than one, describe here: 3.2. Make: Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clai the amount of any secured Creditors Who Have Claim. Current value of the entire property?	claims on Schedule D:



Case number (if known)	· · · · · · · · · · · · · · · · · · ·
Case number (ir known)	

Make: Model: Year: Approximate r Other informa		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clai the amount of any secured Creditors Who Have Claim Current value of the entire property? \$	I claims on <i>Schedule D:</i>
Make: Model: Year: Approximate		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any secured Creditors Who Have Clain Current value of the entire property?	d claims on Schedule D:
Other informa	ition:	☐ Check if this is community property (see instructions)	\$	\$
Vatercraft, aircraft Ex <i>amples:</i> Boats, tr] No	t, motor homes, ATVs and crailers, motors, personal wate	other recreational vehicles, other vehicles, and acces rcraft, fishing vessels, snowmobiles, motorcycle accesso	sories _{ories}	
		Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on <i>Schedule D:</i>
4.1. Make:			the amount of any secure	d claims on Schedule D: ms Secured by Property.
4.1. Make: Model: Year:		□ Debtor 1 only□ Debtor 2 only□ Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ms Secured by Property. Current value of the
4.1. Make: Model: Year: Other informa		 □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one.	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured of the amount of any secure	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
4.1. Make: Model: Year: Other informa	more than one, list here:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$

First Name Middle Name



Case number (if known)_____

Iousehold goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No	
a No	
Yes. Describe	\$ O
Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
collections; electronic devices including cell phones, cameras, media players, games	
□ No	7. 0
Yes. Describe	\$
Collectibles of value	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
No Yes, Describe	\$
Equipment for sports and hobbies	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
✓ No ☐ Yes, Describe	\$ <i>O</i>
Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe	\$ O
Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Pres. Describe	s <u>ao</u>
Shirt, Mess, Parts, 8hols, bag & Wallet	necosimi
Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
gold, silver	_
✓ No Yes, Describe	\$
Non-farm animals Examples: Dogs, cats, birds, horses	
✓ No ✓ Yes, Describe	\$U
Any other personal and household items you did not already list, including any health aids you did not list	
	and containing the same of the
✓ No ☐ Yes, Give specific	\$ <i>D</i>
information	1 10
. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$ 20U





Case number	(if known)
Oddo Hallibol	(1) 10101111)

Part 4: Describe Your Financial Assets

Do you own or have any le	egal or equitable interest in a	nny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Examples:</i> Money you h	ave in your wallet, in your hom	e, in a safe deposit box, and on hand whe	en you file your petition	
☐ No ☐ Yes			··· Cash:	s_20,00
17. Deposits of money <i>Examples:</i> Checking, sa	avings, or other financial accou nilar institutions. If you have m	nts; certificates of deposit; shares in credi ultiple accounts with the same institution,	t unions, brokerage houses list each.	,
No Yes		Institution name:		
↓ Yes				140 18
	17.1. Checking account:	_BECU		\$ <u>40.\alpha</u>
	17.2. Checking account:	,		\$
	17.3. Savings account:			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:			. \$
	17.7. Other financial account:			. \$
	17.8. Other financial account:			- \$
	17.9. Other financial account:			- \$
	17.9. Other intaricial account.			
18. Bonds, mutual funds, <i>Examples:</i> Bond funds,	or publicly traded stocks investment accounts with brok	serage firms, money market accounts		
No No	In this tien or incurr name:			
☐ Yes	Institution or issuer name:			\$
				\$
				\$
19. Non-publicly traded s an I∕LC, partnership,	stock and interests in incorpo and joint venture	orated and unincorporated businesses	, including an interest in	
₩ No	Name of entity:		% of ownership: 0%	•
Yes. Give specific information about				\$
them			0% %	\$
				Φ

Uun	hni	Hoffman
First Name	Middle Name	Last Name

Case number	(if known)	 	

Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. 401(k) or similar plan: Pension plan: Retirement account: Regirement account: Keogh: Additional account: Additional account: Additional account: Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications constants, or others No Yes		lude personal char	er negotiable and non-negotiable instruments cks, cashiers' checks, promissory notes, and money orders. nnot transfer to someone by signing or delivering them.	
Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ves. List each account separately. Type of account institution name: 401(k) or similar plan: Pension plan: Pension plan: Retirement account: Regit: Additional account: Additional account: Additional account: Additional account: Scarpies: Additional account: Account: Additional account: Additional account: Additional account: Additional account: Account: Additional account: Account: Additional account: Account: Additional account: Account: Account: Additional	Yes. Give specific	Issuer name:		\$
Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 409(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: S. S. S. Additional account: S. S. S. S. S. Additional account: S. S. S. Additional account: S. S. S. Additional account: S. S. S. S. Additional account: S. S. S. S. S. S. S. S. S. S	them			\$
Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other perison of profitestation or profitestation of profitestation of profitestation of profitestation of profitestation or				\$
Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other perison of profitestation or profitestation of profitestation of profitestation of profitestation of profitestation or				
account separately. Type of account Institution name: 401(k) or similar plan: Pension plan:	Examples: Interests in IF	accounts RA, ERISA, Keogh, 4	01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
A01(k) or similar plan: Pension plan:		Type of account:	Institution name:	
Pension plan: IRA:	account copulatory.		· · · · · · · · · · · · · · · · · · ·	\$
IRA: Retirement account: Keogh: Additional account: Additional account: Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Heating cil: Security deposits and prepayments Institution name or individual: Electric: Gas: Heating cil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: Sannuitties (A contract for a periodic payment of money to you, either for life or for a number of years) No Security deposits and prepayment of money to you, either for life or for a number of years) Institution name or individual: Security deposit on rental unit: Security de		• •		\$
Retirement account: Keogh: Additional account: S Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications corporanies, or others No No Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: S Annylities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description:		·		\$
Reogh:				\$
Additional account: Additional account: Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes				\$
Additional account: Additional account: Additional account: Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: S. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes				\$
Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: S. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes		Additional account:		
Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No		Additional account.		
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	Your share of all unuse Examples: Agreements companies, or others No Yes	Additional account: prepayments d deposits you have with landlords, prepared to the second of the s	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual: rental unit: mut of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$

Hoffman Hoffman

Case number (if known)_	

			rogram, or under a qualif	ied state tuition program.	
Interests in an education IRA	A, in an account	in a qualified ABLE p			
26 U.S.C. §§ 530(b)(1), 529A((b), and 529(b)(1)).			
No					
☐ Yes	Institution name	e and description. Sepa	rately file the records of an	y interests.11 U.S.C. § 521(c)):
					\$
					\$
					\$
					
Trusts, equitable or future in	nterests in prop	erty (other than anyth	ing listed in line 1), and r	ights or powers	
exercisable for your benefit	ı				
☑ No	-				
Yes. Give specific					\$
information about them					
Patents, copyrights, tradem	aarka trada sasi	rote and other intelled	tual property		
Examples: Internet domain no	ames, websites, t	proceeds from royalties	and licensing agreements		
/	J				
No Standardina	1000 200 00 00 00 00 00 00 00 00 00 00 00				
Yes. Give specific information about them					\$
III John Mador and a series					<u>-</u>
Licenses, franchises, and c	other general int	angibles			
Examples: Building permits,	exclusive licenses	s, cooperative associati	on holdinas, liquor licenses	s, professional licenses	
T No			•		
No No Cive specific					
☑ No☑ Yes. Give specific information about them					\$
☐ Yes. Give specific					\$
Yes. Give specific information about them					Current value of the
Yes. Give specific information about them					Current value of the portion you own? Do not deduct secured
Yes. Give specific information about them					Current value of the portion you own?
Yes. Give specific information about them					Current value of the portion you own? Do not deduct secured
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Yes. Give specific information about them Tax refunds owed to you No Yes. Give specific inform about them, includir you already filed the and the tax years Family support Examples: Past due or lump No Yes. Give specific inform	nation ng whether e returns o sum alimony, sp	ousal support, child su	oport, maintenance, divorce	Federal: State: Local: e settlement, property settlem Alimony: Maintenance: Support: Divorce settlement: Property settlement:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$ \$ s s s s s s s s s s s
Yes. Give specific information about them Tax refunds owed to you No Yes. Give specific inform about them, includir you already filed the and the tax years Family support Examples: Past due or lump No Yes. Give specific inform	nation ng whether e returns o sum alimony, sp	ousal support, child su	oport, maintenance, divorce	Federal: State: Local: e settlement, property settlem Alimony: Maintenance: Support: Divorce settlement:	Current value of the portion you own? Do not deduct secured claims or exemptions. \$
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Debtor 1 Hoffman Hoffman Last Name

Case number	(if known)	 	

31. Interests in insurance policies			
Examples: Health, disability, or life insuran	ce; health savings account (HSA); c	redit, homeowner's, or renter's insurance	
✓ No		Beneficiary:	Surrender or refund value:
Yes. Name the insurance company of each policy and list its value	Company name:	Deficilitary.	
of oddin pelies and herein			\$
			\$
			\$
			Ψ
32. Any interest in property that is due you	from someone who has died		
If you are the beneficiary of a living trust, e property because someone has died.	xpect proceeds from a life insurance	e policy, or are currently entitled to receive	
☑ No			1
Yes. Give specific information			
Tes. Give specific intermation			\$
		l d for movement	
33. Claims against third parties, whether or	not you have filed a lawsuit or m	nade a demand for payment	
Examples: Accidents, employment dispute	s, insurance claims, or rights to suc	•	
☐ No			100
Yes. Describe each claim	,		\$
34. Other contingent and unliquidated clair	ns of every nature, including cou	nterclaims of the debtor and rights	•
to set off claims			
No			
Yes. Describe each claim			\$
	, liet		
35. Any financial assets you did not alread	/ list		7
□∕No			
Yes. Give specific information			\$
36. Add the dollar value of all of your entri	es from Part 4. including any entr	ies for pages you have attached	
for Part 4. Write that number here		→	\$
101 Fait 4. Write that hamber never			
			at a state in Boxt 1
Part 5: Describe Any Business	Related Property You Ow	n or Have an Interest In. List any r	eal estate in Part 1.
37. Do you own or have any legal or equita	ble interest in any business-relat	ted property?	
No. Go to Part 6.			
Yes, Go to line 38.			
			Current value of the
			portion you own?
			Do not deduct secured claims or exemptions.
			e. evenile
38. Accounts receivable or commissions y	ou already earned		
	-	·	stage
☑ No			
Yes. Describe			\$
Operation to the control of the cont			
39. Office equipment, furnishings, and su	oplies	ines, rugs, telephones, desks, chairs, electronic devices	3
	re, modems, printers, copiers, rax machi	ines, rugs, telephones, desks, chairs, electronic devices	
☑ No			1
Yes, Describe			\$
			

Debtor 1 Case number (if known)	
0. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	\$
Yes, Describe	
11. Inventory No Yes, Describe	\$
12. Interests in partnerships or joint ventures 13. No	
Yes. Describe Name of entity: """ """ """ """ """ """ """ """ """	\$
% 	\$ \$
43. Customer lists, mailing lists, or other compilations 13. No	
Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe	
44. Any business-related property you did not already list	\$
44. Any business-related property you did not already	\$
Information	\$ \$
	\$ \$
	\$ \$
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	Ψ
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In If you own or have an interest in farmland, list it in Part 1.	1.
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7.	
Yes. Go to line 47.	Current value of the portion you own? Do not deduct secured claims or exemptions.
47. Farm animals Examples: Livestock, poultry, farm-raised fish	
☑ No □ Yes	\$
	7

W	W	h	Ň
First/Nam	e	Mid	lle Name

Hoffman

Case number	(if known)_	

48. Crops—either growing or harvested	ALL STATES
☑ No	Company of the Compan
☐ Yes. Give specific information	\$
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No	
☐ Yes	\$
50. Farm and fishing supplies, chemicals, and feed No	
☐ Yes	\$
51. Any farm- and commercial fishing-related property you did not already list	
Yes. Give specific information	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership	
No No	\$
☐ Yes. Give specific information	\$
	\$
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$
Part 8: List the Totals of Each Part of this Form	
	\$
55. Part 1: Total real estate, line 2	Taylor Common
56. Part 2: Total vehicles, line 5 \$	100
57. Part 3: Total personal and household items, line 15 \$	1
58. Part 4: Total financial assets, line 36	
59. Part 5: Total business-related property, line 45	
60. Part 6: Total farm- and fishing-related property, line 52	
61. Part 7: Total other property not listed, line 54 +\$	700
62. Total personal property. Add lines 56 through 61	+\$
63. Total of all property on Schedule A/B. Add line 55 + line 62	\$

Fill in this information to identify your case:				
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the	e: District o	of	
Case number	<u>.</u>			

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	art 1: Identify the Property You Claim	as Exempt		
	Which set of exemptions are you claiming? ☐ You are claiming state and federal nonbank ☐ You are claiming federal exemptions. 11 U	cruptcy exemptions. 11 .S.C. § 522(b)(2)	U.S.C. § 522(b)(3)	
2.	For any property you list on Schedule A/B th	nat you claim as exem	pt, fill in the information botom	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
1	Schedule A/B that lists this property	Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description:	\$	\$ 100% of fair market value, up to	
	Line from Schedule A/B:		any applicable statutory limit	
	Brief description:	\$	\$ 100% of fair market value, up to	
	Line from Schedule A/B:		any applicable statutory limit	
	Brief description:	\$		
	Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
3.	. Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3	of more than \$170,350? Byears after that for cas	? es filed on or after the date of adjustment.)
and Alphania	☐ No☐ Yes. Did you acquire the property covered			
	☐ No ☐ Yes			

De	htor	1

4010 1	Last Name

Case number	(if known)

Part 2:	Additional	Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$. • \$	
ine from	•	100% of fair market value, up to any applicable statutory limit	
Schedule A/B: Brief	. \$	□ \$	
description: ————————————————————————————————————		100% of fair market value, up to any applicable statutory limit	
Scriedule Avb.	The second secon		The state of the s
Brief description:	\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	\$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	_ 🗆 \$	
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	_ \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	_ 🗆 \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	_ \$	
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$\$ \$	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	_ \$	
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	\$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your case	Hoffman			
First Name Middle N Debtor 2 (Spouse, if filing) First Name Middle N	I .			
United States Bankruptcy Court for the:	District of			
Case number			☐ Check	f this is an
(If known)			amendo	
4000				
Official Form 106D		d by Droi	ortv	12/15
	s Who Have Claims Secure			
information. If more space is needed, copy additional pages, write your name and cas				any
Yes. Fill in all of the information below.		,9 0.00 10 15		
Part 1: List All Secured Claims		Column A	Column B	Column C
for each claim. If more than one creditor t	nore than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street	-			
	As of the date you file, the claim is: Check all that apply. — — Contingent			
	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	 An agreement you made (such as mortgage or secured car loan) 			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
☐ Check if this claim relates to a community debt		-		
Date debt was incurred	Last 4 digits of account number	\$	\$	\$
Creditor's Name	Describe the property that secures the claim.			
Official S Marie				
Number Street	As of the date you file, the claim is: Check all that apply			
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only	☐ Judgment lien from a lawsuit			
At least one of the debtors and another	Other (including a right to offset)	_		
Check if this claim relates to a community debt				
Data debt was insurred	Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

Historiane HOFFMan Last Name

Case number	(if known)_	

Additional Page Part 1: After listing any entries on this page by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name		7		
Number Street				
	- As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	☐ Contingent ☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	 An agreement you made (such as mortgage or secured car loan) 			
Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Judgment lien from a lawsuit			
At least one of the deptots and another	Other (including a right to offset)	_		
 Check if this claim relates to a community debt 				
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street	-			
	As of the date you file, the claim is: Check all that apply	•		
	Contingent Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)			
☐ Check if this claim relates to a community debt	United (including a right to onset)	_		
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	_\$
Creditor's Name				
Number Street	_			
	As of the date you file, the claim is: Check all that appli	/.		
	☐ Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only	Judgment lien from a lawsuit			
At least one of the debtors and another	Other (including a right to offset)			
☐ Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entri	es in Column A on this page. Write that number here	»: _{\$}		
If this is the last page of your for	n, add the dollar value totals from all pages.	\$		

or 1					Case number (if known)
	First Name	Middle Name	Last Name		
art 2:	· · · · · · · · · · · · · · · · · · ·			That You Already	
ency is tr	ying to colle	ct from you for creditor for an		someone else, list th you listed in Part 1, li	a debt that you already listed in Part 1. For example, if a collection e creditor in Part 1, and then list the collection agency here. Similarly, i ist the additional creditors here. If you do not have additional persons i
					On which line in Part 1 did you enter the creditor?
Name					Last 4 digits of account number
Number	Street				<u>.</u>
			1		<u>-</u> -
City			State	ZIP Code	
					On which line in Part 1 did you enter the creditor? Last 4 digits of account number
Name					Last 4 digits of account fidings.
Number	Street				_
City			State	ZIP Code	_
					On which line in Part 1 did you enter the creditor?
Name					Last 4 digits of account number
Number	Street				
City			State	ZIP Code	_
					On which line in Part 1 did you enter the creditor?
Name					Last 4 digits of account number
Number	Street				_
					
City			State	ZIP Code	On which line in Part 1 did you enter the creditor?
Name -					Last 4 digits of account number
Name					_
Number	Street				_
City			State	ZIP Code	_
	CON 2018 CONTRACT CON			and absorb at 100° 20° to a specie demokratika disent albert 100° 10° 10° 10° 10° 10° 10° 10° 10° 10	On which line in Part 1 did you enter the creditor?
Name					Last 4 digits of account number

ZIP Code

State

Number

City

Debtor 1 Debtor	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of	
Case number(If known)	Check if this is ar amended filing
Official Form 106E/F	40/45

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. Be as complete and accurate as possible. Use Part 1 for Greators with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project 1 claims and 1 at 2 for statistics with Project

A/B: Property (Official Form 106A/B) and on Schedul creditors with partially secured claims that are listed needed, copy the Part you need, fill it out, number the any additional pages, write your name and case num	in Schedule D: Creditors who have Claims Secure e entries in the boxes on the left. Attach the Contin			
Part 1: List All of Your PRIORITY Unsecured	l Claims			
	ditor has more than one priority unsecured claim, list th claim has both priority and nonpriority amounts, list tha aims in alphabetical order according to the creditor's na art 1. If more than one creditor holds a particular claim,	me. If you have	more than two	priority
21 Grenesis Cradit Mamt	Last 4 digits of account number	£2,050	\$	\$
Priority Creditors Name Priority Creditors Name Street Street	When was the debt incurred? 5-2016	,		!
EVEVET, Wa 98213 City State ZIP Code	As of the date you file, the claim is: Check all that apply Contingent Unliquidated			
Who incurred the debt? Check one. Debtor 1 only	Disputed			
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
Is the claim subject to offset?	Other. Specify Rental Deposit			
2.2 AH4R	Last 4 digits of account number	\$ 24, W)	\$
Priority Creditor's Name Many Make	When was the debt incurred? Jon 33			
Report Pilot Rd	As of the date you file, the claim is: Check all that apply	' .		
105 Vegas, NV 99119	Contingent			
City State ZIP Code	Unliquidated			
Whe incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
Is the claim subject to offset?	intoxicated Other. Specify Fach 94.	-		
☑ No ☐ Yes			Manager to Assert Supplement S	
				ie 1 of



ase number	if known)
doo manibo.	77.70.00.00

r listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprior amount
	Last 4 digits of account number	\$. \$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
4	Contingent			
City State ZIP Code	☐ Unliquidated☐ Disputed			
Who incurred the debt? Check one.	·			
☐ Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?	•			
□ No □ Yes				
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply	•		
	Contingent			
City State ZIP Code	☐ Unliquidated☐ Disputed			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
☐ At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?	•			
□ No				
Yes	Leaf A digita of account number	\$	\$	\$
Priority Creditor's Name	Last 4 digits of account number			
Number Street	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply	<i>1</i> .		
	□ Contingent			
City State ZIP Code	Unliquidated			
City	☐ Disputed			•
Who incurred the debt? Check one.	- CRRIORITY			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
☐ At least one of the debtors and another	 Claims for death or personal injury while you were intoxicated 			
☐ Check if this claim is for a community debt	Other. Specify	-		
Is the claim subject to offset?				
□ No				
☐ Yes				



ase number	(if known)

Part	List All of Your NONPRIORITY Offsecured Glamm	
3 D	o any creditors have nonpriority unsecured claims against yo	ou?
J. D	No. You have nothing to report in this part. Submit this form to t	the court with your other schedules.
	No. You have nothing to report in this part. Submit this form to the Yes	•
		transition had a sach claim. If a creditor has more than one
4. L	ist all of your nonpriority unsecured claims in the alphabetica	al order of the creditor who holds each claim. If a creditor has more than one him. For each claim listed, identify what type of claim it is. Do not list claims already be list the other creditors in Part 3.If you have more than three nonpriority unsecured
n	onpriority unsecured claim, list the creditor separately for each cla	im. For each claim listed, identify what type of claim it is. Bo not not all the standard and an arrangement in the control of the standard and a standard in the control of the standard and a standard in the control of the standard and a standard in the
ir	ncluded in Part 1. It more than one creditor floids a particular claim laims fill out the Continuation Page of Part 2.	i, list till other stouries and a
С	laims fill out the Continuation Page of Part 2.	Total claim
) Qual cialiii
.1		Last 4 digits of account number s
.,	The second secon	
	Nonpriority Creditor's Name	When was the debt incurred?
ė		
	Number Street	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.
	City State ZIP Code	_
		☐ Contingent
	Who incurred the debt? Check one.	Unliquidated
	☐ Debtor 1 only	☐ Disputed
	Debtor 2 only	T of NONDBIODITY upgooured claim:
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:
	At least one of the debtors and another	☐ Student loans
		☐ Obligations arising out of a separation agreement or divorce
	☐ Check if this claim is for a community debt	that you did not report as priority claims
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts
	No	Other. Specify
	Yes	
		\$
4.2		Last 4 digits of account number
	Nonpriority Creditor's Name	When was the debt incurred?
	Number Street	As of the date you file, the claim is: Check all that apply.
		As of the date you me, the claim is: onesit an aller apply
	City State ZIP Code	Contingent
		☐ Unliquidated
	Who incurred the debt? Check one.	☐ Disputed
	Debtor 1 only	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:
	Debtor 1 and Debtor 2 only	☐ Student loans
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce
Annual Property Control of the Contr	☐ Check if this claim is for a community debt	that you did not report as priority claims
		Debts to pension or profit-sharing plans, and other similar debts
	Is the claim subject to offset?	Other. Specify
	☐ No	· ·
	Yes	
4.3		Last 4 digits of account number
7.5	Nonpriority Creditor's Name	
***************************************	Nonthiothy Creditor's Name	When was the debt incurred?
	N. Ctroot	
	Number Street	As of the date you file, the claim is: Check all that apply.
	City State ZIP Code	As of the date you file, the claim is. Officer all that apply.
	City State ZIP Code	☐ Contingent
	Who incurred the debt? Check one.	☐ Unliquidated
	Debtor 1 only	Disputed
	Debtor 2 only	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:
	☐ At least one of the debtors and another	
		Student loans
	Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts
	□ No	Other. Specify
	Yes	



Your NONPRIORITY Unsecured Claims — Continuation Page

•	,	
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
□ No □ Yes		
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
☐ Debtor 1 only	The ACADON PRIORITY upgedured claim	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loansObligations arising out of a separation agreement or divorce that	
At least one of the debtors and another	you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
□ No		
☐ Yes		
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
□ No		
Yes		





Case number (if known)	
------------------------	--

Part 3:

List Others to Be Notified About a Debt That You Already Listed

	ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claim
	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Nalife	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
City State ZIP Code	Last 4 digits of account number
News	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	·
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
City State ZIP Code	LAST # OIGHS OF ACCOUNT HUMBER



Case number	(if known)
Jase Hullibel	(II ANOWN)

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

er listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code Who incurred the debt? Check one.	☐ Contingent☐ Unliquidated☐ Disputed☐	
☐ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ☐ No ☐ Yes	Other. Specify	
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
☐ At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ☐ No ☐ Yes	Other. Specify	
	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
□ No □ Yes		no Andri Age T

Fight Name Middle Name

Hoffman

Case number (if known)_____

Part 4:

Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. **Other.** Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

Total claim

- 6a. \$ +
- 6b. s + +
- 6c. s
- 6d. + s A
- 6e. \$_____

Total claim

- 6a. \$ 6
- 6h. s A
- 6i. + s + +

			-	
Fill	in this information to identify your case:	tatiman		
Deb	First Name Middle Name	Last Name		
(Spo	tor 2 use If filing) First Name Middle Name	Last Name		
Unit	ed States Bankruptcy Court for the: District	of		
	e number own)			Check if this is an amended filing
L				
Off	icial Form 106G			
Sc	hedule G: Executory Cor	ntracts and U	nexpired Leases	12/15
infor	s complete and accurate as possible. If two marri mation. If more space is needed, copy the additio ional pages, write your name and case number (i	onal page, fill it out, number	r, both are equally responsible for supporting the entries, and attach it to this page. C	olying correct On the top of any
	Do you have any executory contracts or unexpire ☐ No. Check this box and file this form with the cou ☐ Yes. Fill in all of the information below even if the	irt with your other schedules.	You have nothing else to report on this ford	m. 106A/B).
2.	List separately each person or company with who example, rent, vehicle lease, cell phone). See the unexpired leases.	am you have the centract o	r lease. Then state what each contract o	r lease is for (for
			State what the contract or lease is fo	or .
	Person or company with whom you have the con	itract or lease	State what the contract of loads is is	-
2.1				
A-DECEMBER OF THE PERSON NAMED OF THE PERSON N	Name			
And the second s	Number Street			
	City State ZIP Code		net a version de part un anticipat de la companya de participat de la completació de la completa de la company	
2.2	Name			
	,			
2.3	City State ZIP Code			
	Name			
and the second s	Number Street			
	City State ZIP Code			
2.4				
The state of the s	Name			
	Number Street			
	City State ZIP Code			
2.5	Name			
Section of the sectio	Number Street			
	Transport Career			





Case number	(if known)	 	

Additional Page if You Have More Contracts or Leases

Person or company with whom you have the contract or lease

What the contract or lease is for

2 <u>2</u>											•
	Name					•					
	Number	Street				•					
	City		State	ZIP Code		-					
2				na terah kandi ang di mandapan di manan di minan kandi di di digip dan kananan dan didil	t val and generated ment of the share large and the description of the contract of the contrac	namen nga kuna kita kinaking pala an kanabagi kida ngi naking agapa Malikanan dakinin	-yemad sedi yiki zeda filologila Ciba dini filo				
	Name					-					
	Number	Street				-					
	City		State	ZIP Code		-					
2									gain midden / (19) dal gaf (18), permedine lan com la ¹ a ¹ a ¹		
	Name					-					
	Number	Street				-					
	City		State	ZIP Code		-					
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	Number	Street				_					
	City		State	ZIP Code		<u> </u>					
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2	Name			,		_					Ÿ
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2	Name										
	Number	Street									1
Administration			State	ZIP Code							
	City		State	Zii Godo							
2	Name					_					
		Street									
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-	City		State	ZIP Code						unan ayayaya unan	
2	Nove										
	Name				:						
	Number	Street									
	City	er da, ser i merdar dar barryongi saramar dan barryah semak sas	State	ZIP Code				The same the same threat constraints and also the		euranimin ^t ia Mariacasi _n a	

Fill in this information to identify your case:					
Debtor 1 June Name	Ho Middle Name	FMW Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:	District of				
Case number (If known)					

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

ase n	number (if known). Answer every question.	
4	o you have any codebtors? (If you are filing a joint case, do not list either spouse No Yes	
o 1/1	Vithin the last 8 years, have you lived in a community property state or territo urizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Wa	ry? (Community property states and territories include ashington, and Wisconsin.)
	No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the tim	
	□ No □ Yes. In which community state or territory did you live?	
	Name of your spouse, former spouse, or legal equivalent	-
	Number Street	_
	City State ZIP Code	_
	n Column 1, list all of your codebtors. Do not include your spouse as a codeb	itor if your spouse is filling with you. List the person
9	Shown in line 2 again as a codebtor only if that person is a guarantor or cosign schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule E/F, or Schedule G to fill out Column 2. **Column 1: Your codebtor**	iner, wake sure you have listed the creation on
9	shown in line 2 again as a codebtor only if that person is a guarantor or cosig Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Sche Schedule E/F, or Schedule G to fill out Column 2.	edule G (Official Form 106G). Use Schedule D,
	shown in line 2 again as a codebtor only if that person is a guarantor or cosig Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Sche Schedule E/F, or Schedule G to fill out Column 2.	edule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the debt
· · · · · · · · · · · · · · · · · · ·	shown in line 2 again as a codebtor only if that person is a guarantor or cosig Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Sche Schedule E/F, or Schedule G to fill out Column 2.	Column 2: The creditor to whom you owe the debt
· · · · · · · · · · · · · · · · · · ·	shown in line 2 again as a codebtor only if that person is a guarantor or cosig Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Sche Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor	column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line
	Schown in line 2 again as a codebtor only if that person is a guarantor or costs and the school of t	Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line
3.1	Shown in line 2 again as a codebtor only if that person is a guarantor or costs Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Sche Schedule E/F, or Schedule G to fill out Column 2. **Column 1: Your codebtor** Name Number Street	Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
3.1	Schown in line 2 again as a codebtor only if that person is a guarantor or costs and the school of t	Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line
3.1	Schown in line 2 again as a codebtor only if that person is a guarantor or costs Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Sche Schedule E/F, or Schedule G to fill out Column 2. **Column 1: Your codebtor** Name Number Street City State ZIP Code	Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
3.1	Schown in line 2 again as a codebtor only if that person is a guarantor or costs and schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule E/F, or Schedule G to fill out Column 2. **Column 1: Your codebtor** Name Number Street Number Street Number Street	Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule G, line Schedule E/F, line
3.1	Schown in line 2 again as a codebtor only if that person is a guarantor or costs and schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Name Number Street City State ZIP Code Name	Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule G, line Schedule D, line Schedule G, line Schedule G, line Schedule E/F, line Schedule E/F, line
3.1	Schown in line 2 again as a codebtor only if that person is a guarantor or costs and schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule E/F, or Schedule G to fill out Column 2. **Column 1: Your codebtor** Name Number Street Number Street Number Street	Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule G, line Schedule D, line Schedule D, line
3.1	Schown in line 2 again as a codebtor only if that person is a guarantor or costs and schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Name Number Street City State ZIP Code Number Street City State ZIP Code	Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule G, line Schedule G, line Schedule G, line Schedule E/F, line Schedule G, line
3.1	Schown in line 2 again as a codebtor only if that person is a guarantor or costs and schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Name Number Street City State ZIP Code Number Street City State ZIP Code	Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line

N	ıM	NNI
First	Vame	Middle Name



Case number	(if known)

	Additional Page to List	More Codebtors		
. (Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3				_ Schedule D, line
	Name			☐ Schedule E/F, line
g-p-	N. J. Cheek			─ Schedule G, line
	Number Street			
	City	State	ZIP Code	
3				Schedule D, line
	Name			Schedule E/F, line
				Schedule G, line
	Number Street			
	City	State	ZIP Code	
3				Schedule D, line
	Name			Schedule E/F, line
				Schedule G, line
	Number Street			Concadio e, inie
		State	ZIP Code	<u> </u>
\vdash	City	·		
3				Schedule D, line
	Name			☐ Schedule E/F, line
	Number Street			Schedule G, line
	City Control of the	State	ZIP Code	
3				Schedule D, line
	Name			☐ Schedule E/F, line
	Object			─ Schedule G, line
	Number Street			
	City	State	ZIP Code	
3	Appendix and Text (1) (2) (1) (2) (2)			Schedule D, line
	Name			Schedule E/F, line
-				Schedule G, line
	Number Street			
	City	State	ZIP Code	
3				Ochodule D. line
<u>[-</u>]	Name			Schedule D, line
				Schedule G, line
A0000000000000000000000000000000000000	Number Street			Goriedado O, into
		State	ZIP Code	
3	City	Siale	EII 0040	
	Nama			Schedule D, line
	Name			Schedule E/F, line
	Number Street			Schedule G, line
Water Company				
	City	State	ZIP Code	

Fill in this information to identify	your case:	*				
Debtor 1 Jun 1 W	H	offmar	<u></u>			
Debtor 2 (Spouse, if filling) First Name	Middle Name Middle Name	Last Name				
United States Bankruptcy Court for the:						
Case number				Check if t	this is:	
(If known)				🗖 An an	nended filing	
					plement showing pos le as of the following	
Official Form 106l	-			MM / I	DD / YYYY	
Schedule I: You	ır Income					12/15
Be as complete and accurate as posupplying correct information. If you are separated and your spot separate sheet to this form. On the Part 1: Describe Employment	ou are married and not fil use is not filing with you, top of any additional pa	ing jointly, and yo	our spouse formation a	is living with y	you, include informationse. If more space is	on about your spouse. needed, attach a
Fill in your employment information.		Debtor 1			Debtor 2 or non-f	iling spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☐ Not employ	red		EmployedNot employed	
Include part-time, seasonal, or self-employed work.	Occumetton					
Occupation may include student or homemaker, if it applies.	Occupation					
	Employer's name	-				
	Employer's address	Number Street			Number Street	
						~
		City	State ZI	Code	City	State ZIP Code
	How long employed the	re?				
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of spouse unless you are separated.		n. If you have noth	ing to report	for any line, w	rite \$0 in the space. Incl	ude your non-filing
If you or your non-filing spouse habelow. If you need more space, at	ive more than one employe		ormation for	all employers fo	or that person on the line	es
			Fo	or Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sala deductions). If not paid monthly,			2. \$	0	\$	
3. Estimate and list monthly over	time pay.		3. +\$	0	+ \$	
4. Calculate gross income. Add lin	ne 2 + line 3.		4. \$	0	\$,

Debtor	1	



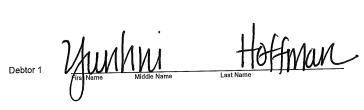


Case number	(if known)		

	V		For	Debtor 1	For Debtor 2 or	
					non-filing spouse	ALL ALGORITHM
Conv	line 4 here→	4.	\$	0_	\$	
	l payroll deductions:				¢	
	ax, Medicare, and Social Security deductions	5a.	\$		φ ¢	
	Mandatory contributions for retirement plans	5b.			Ψ	
	oluntary contributions for retirement plans	5c.	ф		φ	
5d. i	Required repayments of retirement fund loans	5d.	\$		φ	
	nsurance	5e.	»		φ	
5f. I	Domestic support obligations	5f.	φ		\$	and other property of the state
	Jnion dues	5g.	Φ		Ψ	
5h. (Other deductions. Specify:	5h.	+ \$		+ \$	A ALAMONY MATERIAL PROPERTY AND A ALAMONY MATERIAL PROPERTY AN
6. Add	the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$		\$	
7. Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0_	\$	
	all other income regularly received:					
	Net income from rental property and from operating a business, profession, or farm					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	Or ex	\$	
	Interest and dividends	8b.	\$. Ψ	
	Family support payments that you, a non-filing spouse, or a depende regularly receive	ent		70	,	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	1,110	\$	
8d.	Unemployment compensation	8d.	\$	a		
	Social Security	8e.	Φ			
	Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistar that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	nce	,	~	c.	
	Specify:	8f.	\$_	-6	Φ	
8g.	Pension or retirement income	8g	\$_	0	\$	A CONTRACTOR OF THE CONTRACTOR
	Other monthly income. Specify:	8h	+ \$_	8	+\$	A CONTRACTOR OF THE CONTRACTOR
	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	Ø	\$	
10. Calc Add	ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10). \$_	,170	+ \$=	= \$
11. Stat	e all other regular contributions to the expenses that you list in Sche	dule	J.		and other	
Inclu	ude contributions from an unmarried partner, members of your household,	your	depen			
1	not include any amounts already included in lines 2-10 or amounts that are	not	availab	ie to pay exp	enses listed in <i>Schedule J.</i> 11. ⁴	+ \$ 1,170
	cify:		ult in th	a combined n		1 171
12. Add Writ	the amount in the last column of line 10 to the amount in line 11. The ethat amount on the Summary of Your Assets and Liabilities and Certain	e resi Statis	ait is the stical In	formation, if i	t applies 12.	\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
						monthly income
	you expect an increase or decrease within the year after you file this	forn	1?			
1	Yes. Explain:					

Debtor 1 Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: Case number (If known) Official Form 106J	Middle Name Middle Name Last Name District of	Check if this An amen A supple expenses	ded filing ment showing post s as of the following	ı date:
Schedule J: Yo				12/15
information. If more space is need (if known). Answer every question	ed, attach another sheet to this to	filing together, both are equally recorn. On the top of any additional pa	sponsible for supply nges, write your nam	ing correct e and case number
	Isenoia			
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a series. No. Yes. Debtor 2 must fi		or Separate Household of Debtor 2.		·
2. Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not state the dependents' names.	No Yes. Fill out this information each dependent	Dependent's relationship to for Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you? No Yes
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongo	oing Monthly Expenses			
Estimate your expenses as of you expenses as of a date after the bat applicable date. Include expenses paid for with no such assistance and have include	ankruptcy is filed. If this is a supp on-cash government assistance it ed it on Schedule I: Your Income	(Official Form 106l.)	nent in a Chapter 13 c at the top of the for	in and in the
The rental or home ownership any rent for the ground or lot.	expenses for your residence. Inc	clude first mortgage payments and	4. \$ <u>2.</u>	100
If not included in line 4: 4a. Real estate taxes			τα. ψ <u></u>	<u>0</u>
4b. Property, homeowner's, or			4b. \$	<u></u>
4c. Home maintenance, repair			4c. \$4d. \$	0
4d. Homeowner's association	or condominium dues		, —,	

Official Form 106J Schedule J: Your Expenses Page 23-40926-BDL Doc 13 Filed 06/20/23 Ent. 06/20/23 12:02:13 Pg. 31 of 46



Case number	(if known)	

Your expenses

			, our oxpones
		5.	\$
5.	Additional mortgage payments for your residence, such as home equity loans	J.	
6.	Utilities:	0-	250-
	6a. Electricity, heat, natural gas	6a.	· 801-
	6b. Water, sewer, garbage collection	6b.	· 130x-
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	s A
	6d. Other Specify:	6d.	2/10
7.	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$ 150
9.	Clothing, laundry, and dry cleaning	9.	\$ 100
10.	Personal care products and services	10.	56
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare.	12.	\$
	Do not include car payments.	13.	s 60
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	14.	\$
14.	Charitable contributions and religious donations		
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		40
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$ 100
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		• 0
	Specify:	16.	\$
17.	Installment or lease payments:		· +
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify: Cartaly 5	17c.	\$ 170 A
	17d. Other. Specify:	17d.	\$
18	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$ &
19	· ·	19.	\$
	Specify:	nα	
20	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		s 65
	20a. Mortgages on other property	20a.	. 0
	20b. Real estate taxes	20b.	· 100.
	20c. Property, homeowner's, or renter's insurance	20c.	. 40
	20d. Maintenance, repair, and upkeep expenses	20d.	* * * * * * * * * * * * * * * * * * *
	20e. Homeowner's association or condominium dues	20e.	Ψ

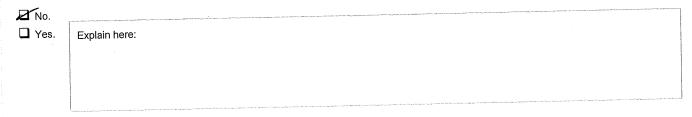
Schedule J: Your Expenses Official Form 106J Case 23-40926-BDL Doc 13 Filed 06/20/23 Ent. 06/20/23 12:02:13 Pg. 32 of 46



21.	Other. Specify:	21.	+\$
22.	Calculate your monthly expenses. 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.	22a. 22b. 22c.	\$_4,486 \$_ \$_4,486
	 Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 	23a. 23b. 23c.	\$_1,170 -\$_4,486 \$_3,316

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?



Fill in this information to identify your case:	
Debtor 1 Fyst Name Middle Name Hoffman	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: District of	
Case number	☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

What is your current marital status?			
☐ Married ☐ Not married			
During the last 3 years, have you lived anywhere on No Yes. List all of the places you lived in the last 3 years.			
Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		☐ Same as Debtor 1	Same as Debtor 1
94a1 angra St. 8	From 6/2018		From
Number Street	To NOW	Number Street	То
Graham Wa 98338 State ZIP Code		City State ZIP Code	
	And the second second second	☐ Same as Debtor 1	Same as Debtor
	From		From
Number Street	То	Number Street	To
City State ZIP Code	-	City State ZIP Code	•
	no, Louisiana, Neva	ua, New Mexico, 1 dorto 1100, 100as, 100as,	(Community property d Wisconsin.)

Part 2: Explain the Sources of Your Income

Statement of Financial Affairs for Individuals Filing for Bankruptcy



Case number	(if known)	

Did you have any income from employmential in the total amount of income you received fyou are filing a joint case and you have inco	from all jobs and all busii	nesses, including part-iii	He activities.	nuu your
Yes. Fill in the details.				
- 100.1 iii iii die detaile.	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For last calendar year:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
(January 1 to December 31,)	Operating a business		Operating a business	
For the calendar year before that: (January 1 to December 31,)	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
(January 1 to Bedember 91,	— Opolating a parinter			
nclude income regardless of whether that inc nemployment, and other public benefit payn ambling and lottery winnings. If you are filing	come is taxable. Examples nents; pensions; rental inc g a joint case and you hav	s of <i>other income</i> are all come; interest; dividends re income that you receiv	ed together, list it only once	ouito, royantioo, aria
nclude income regardless of whether that inc unemployment, and other public benefit payn gambling and lottery winnings. If you are filing	come is taxable. Examples nents; pensions; rental inc g a joint case and you hav	s of <i>other income</i> are all come; interest; dividends re income that you receiv	ed together, list it only once	ouito, royanioo, aria
nclude income regardless of whether that inconemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from a No	come is taxable. Examples nents; pensions; rental inc g a joint case and you hav each source separately. D	s of <i>other income</i> are all come; interest; dividends re income that you receiv	ed together, list it only once	Gross income from each source
nclude income regardless of whether that income memployment, and other public benefit paymambling and lottery winnings. If you are filing list each source and the gross income from the No. No. Yes. Fill in the details.	come is taxable. Examples enents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income	Gross income from each source (before deductions and	yed together, list it only once at you listed in line 4. Debtor 2 Sources of income	e under Debtor 1. Gross income from each source (before deductions an
aclude income regardless of whether that income memployment, and other public benefit paymembling and lottery winnings. If you are filing list each source and the gross income from a No Yes. Fill in the details.	come is taxable. Examples enents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income	Gross income from each source (before deductions and	yed together, list it only once at you listed in line 4. Debtor 2 Sources of income	e under Debtor 1. Gross income from each source (before deductions an
clude income regardless of whether that inchemployment, and other public benefit paymambling and lottery winnings. If you are filling ast each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until	come is taxable. Examples enents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income	Gross income from each source (before deductions and	yed together, list it only once at you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and
iclude income regardless of whether that income memployment, and other public benefit paymembling and lottery winnings. If you are filling ist each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until	come is taxable. Examples enents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income	Gross income from each source (before deductions and exclusions) \$	ped together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and
iclude income regardless of whether that income memployment, and other public benefit paymambling and lottery winnings. If you are filing list each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	come is taxable. Examples enents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income	Gross income from each source (before deductions and exclusions) \$	yed together, list it only once at you listed in line 4. Debtor 2 Sources of income	e under Debtor 1. Gross income from each source (before deductions an
Include income regardless of whether that include income regardless of whether that include incoment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from the the gross	come is taxable. Examples enents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income	Gross income from each source (before deductions and exclusions) \$	ped together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	e under Debtor 1. Gross income from each source (before deductions an
nclude income regardless of whether that income property and other public benefit paying ambling and lottery winnings. If you are filing a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source and the gross income from a list each source	come is taxable. Examples enents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income	Gross income from each source (before deductions and exclusions) \$	Ped together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	e under Debtor 1. Gross income from each source (before deductions an
Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,)	come is taxable. Examples enents; pensions; rental income a joint case and you have each source separately. Debtor 1 Sources of income	Gross income from each source (before deductions and exclusions) \$	pettor 2 Sources of income Describe below.	Gross income from each source (before deductions a

Mw	rhui	Hoffman
First Name	Middle Name	Last Name J J

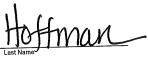
Case number	(if known)		

art 3:	List Certain Payments You I	lade Before	You Filed	тог вапкгиртсу		
Are eith	ner Debtor 1's or Debtor 2's debts	s primarily cor	nsumer debt	s?	•	
	Neither Debtor 1 nor Debtor 2 h "incurred by an individual primaril	as primarily c	onsumer de	bts. Consumer debts are	e defined in 11 U.S.C. § 101	(8) as
	During the 90 days before you file	d for bankrupt	cy, did you pa	ay any creditor a total of	\$6,825* or more?	
	■ No. Go to line 7.					
	U ver Liet helew each graditor	at areditor Do	not include h	avments for domestic su	pport obligations, saon as	
	* Subject to adjustment on 4/01/2	2 and every 3	years after th	at for cases filed on or a	fter the date of adjustment.	
□ v	s. Debtor 1 or Debtor 2 or both ha					
Yes	During the 90 days before you file	ed for bankrupt	cy, did you pa	ay any creditor a total of	\$600 or more?	
		·	•			
	No. Go to line 7.				tal amount you naid that	
	Yes. List below each creditor creditor. Do not include alimony. Also, do not inc	navments for d	iomestic supr	\$600 or more and the to ort obligations, such as ey for this bankruptcy ca	Cillia Support and	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
				\$	\$	☐ Mortgage
	Creditor's Name			· -		☐ Car
						Credit card
	Number Street					Loan repayment
						☐ Suppliers or vendo
						Other
	City State	ZIP Code				
				\$	\$	☐ Mortgage
	Creditor's Name			Ψ	Ψ	☐ Car
						Credit card
	Number Street					Loan repayment
						☐ Suppliers or vendo
						Other
	City State	ZIP Code				
				\$	\$	_ Mortgage
	Creditor's Name					☐ Car
						Credit card
	Number Street					Loan repayment
				-		☐ Suppliers or vendo
						Other
	City State	ZIP Code				

page 3

Case 23-40926-BDL

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V	WYV	VIVU
First	ame	Middle Nam
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sider irpora jent,	ട include your	relatives; an you are an for a busines	ly genera officer, d ss you op	i partners;	relatives	or arry c	owner of 20% or	more of their voting	who was an insider? In you are a general partner; In securities; and any managing Indicated the domestic support obligations,
No Ye	s. List all payn	nents to an ir	nsider.			es of ment	Total amount paid	Amount you still owe	Reason for this payment
							¢	\$	
Īr	nsider's Name						Ψ		
Ī	Number Street								
-	Olfu		State	ZIP Code	_				
	City						\$	\$	
Ī	Insider's Name								
-									
1	Number Street								
-	Number Street								
Vithir	City n 1 year befo	re you filed	State for bank	ZIP Code ruptcy, dic	d you ma	ke any	payments or tra	nsfer any property (on account of a debt that benefited
Within an includ	City n 1 year befo sider? de payments c	n debts guai	for bank	ruptcy, dic	I by an ins		payments or tra Total amour paid		on account of a debt that benefited I Reason for this payment Include creditor's name
Vithinan in:	n 1 year beforsider?	n debts guai	for bank	ruptcy, dic	I by an ins	sider.	Total amour	t Amount you stil	l Reason for this payment
Within in Included No.	n 1 year beforsider?	n debts guai	for bank	ruptcy, dic	I by an ins	sider.	Total amour paid	it Amount you stil owe	l Reason for this payment
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Within included N	City n 1 year before sider? the payments of t	n debts guai	for bank ranteed o	ruptcy, dic	I by an ins	sider.	Total amour paid	it Amount you stil owe	l Reason for this payment

Debtor 1 Hoffman Last Name Last Name

Case number	(if known)		

l such matters, including persor ontract disputes.	nankruptcy, were y nal injury cases, sr	ou a party in any lawsuit, court nall claims actions, divorces, collec	ction suits, paternity actions,	support or custody modification
0				
es. Fill in the details.				Status of the case
	Nature o	f the case Court	or agency	Status of the case
				Pending
Case title		Court Na	ame	
5400 1110	animator La			On appeal
		Number	Street	Concluded
Case number		City	State ZIP Code	
	**************************************	HERE IN COLUMN TWO ISSUES AND ADDRESS OF THE PROPERTY OF THE P		
		Court N		Pending
Case title	· ·	Court N	ame	On appeal
-		** · · · ·	Street	Concluded
		Number	201660	
Case number	ALADO STATE OF THE	0"	State ZIP Cod	e
	4	City	State Zii Ssa	
No. Go to line 11. Yes. Fill in the information below	٧.		Data	Value of the propert
	v .	Describe the property	Date	Value of the propert
	v .	Describe the property	Date	Value of the property
	v.	Describe the property		
es. Fill in the information below	v.			
es. Fill in the information below	v.	Explain what happened		
es. Fill in the information below	v.	Explain what happened Property was repossessed		
es. Fill in the information below	v.	Explain what happened Property was repossessed Property was foreclosed.		
es. Fill in the information below Creditor's Name Number Street		Explain what happened Property was repossessed	d.	
es. Fill in the information below Creditor's Name Number Street	V. State ZIP Code	Explain what happened Property was repossessed Property was foreclosed. Property was garnished.	d.	\$
es. Fill in the information below Creditor's Name Number Street		Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, see	d. bized, or levied.	\$Value of the prope
Creditor's Name Number Street City		Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, see	d. bized, or levied.	\$
es. Fill in the information below Creditor's Name Number Street		Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, see	d. bized, or levied.	\$Value of the prope
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Creditor's Name Number Street City S		Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, see Describe the property Explain what happened Property was repossessed.	d. pized, or levied. Date	Value of the prope
Creditor's Name Number Street City S		Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, see	d. pized, or levied. Date	\$Value of the prope

Fig.t Name Middle Name La	Hoffman
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Case number (if known)	

n 90 days before you filed for bankrupt unts or refuse to make a payment beca	luse you owed a debt:		
0			
o es. Fill in the details.			
50, 1 m m m 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Describe the action the creditor took	Date action	Amount
	Describe the action the creditor took	was taken	
reditor's Name			
			\$
umber Street			
		And the second s	
	Last 4 digits of account number: XXXX		
ity State ZIP Code	Last 4 digits of account number. 70001		
	one of your property in the possession o	of an assignee for the benef	fit of
in 1 year before you filed for bankrupto	cy, was any of your property in the possession o	, u., u	
itors, a court-appointed receiver, a cus	stodian, or another official:		
10			
es es			
Contribute	itions		
List Certain Gifts and Contribu	liona		
		nore than \$600 per person?	
in 2 years before you filed for bankrup	otcy, did you give any gifts with a total value of m	Hote than toos per person	
NA .			
No Yes Fill in the details for each gift.			
No Yes. Fill in the details for each gift.			Walter
Yes. Fill in the details for each gift.	Describe the gifts	Dates you gave the gifts	Value
NO Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts		Value
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Value \$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		\$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Value \$ \$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		\$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts		\$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts		\$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street	Describe the gifts		\$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts		\$
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code	Describe the gifts		\$
Person to Whom You Gave the Gift Number Street	Describe the gifts	the gifts	\$ \$
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Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts	the gifts ———————————————————————————————————	\$ \$ e Value
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Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy



0	mer	1
Case number	(if Known)	

No			
Yes. Fill in the details for each gift or co	ntribution.		
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
			•
Charity's Name	_		\$
State of taken			\$
	-		
Number Street	_		
Adminer officer	·		
City State ZIP Code	_		
Oily Cido In Son			
11.4 Cartain Lagger			
List Certain Losses	ptcy or since you filed for bankruptcy, did you lose anything		
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
			Φ.
			Φ
			
7: List Certain Payments or Tr	ansfers		.
thin 1 year before you filed for bankro	uptcy, did you or anyone else acting on your behalf pay or tra	nsfer any property	to anyone
thin 1 year before you filed for bankrupte	uptcy, did you or anyone else acting on your behalf pay or tra		to anyone
thin 1 year before you filed for bankru u consulted about seeking bankrupto clude any attorneys, bankruptcy petition	uptcy, did you or anyone else acting on your behalf pay or tra		to anyone
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First flame Middle Name	Hoffman
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Case number (if known)	

	Description and value of any property tr	ansferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$
Number Street				\$
City State ZIP Code				
Email or website address	_			
Person Who Made the Payment, if Not You thin 1 year before you filed for bankrup		makada saga nga nahisa nga makasa nga makaka na tanbaka saga na nahisa saga masa sa		
not include any payment or transfer that y No Yes. Fill in the details.	tors or to make payments to your cro	un0191		
1	Description and value of any property	transferred	Date payment or transfer was made	Amount of payr
Person Who Was Paid	,			\$ <u>.</u>
Number Street	_			\$
				Ψ
City State ZIP Code	uptcy, did you sell, trade, or otherwise	transfer any prop	erty to anyone, other th	an property
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Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy



Case number	(if known)

No	set-protection devices.)			
】No 〗Yes. Fill in the details.				
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	Description and value of the proper	ty transferred		was made
	All the controlling to the action of the controlling of the controllin			
Name of trust		•		
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	Carrier As recommended the Carrier and American As Carrier and American Association and Association and American Association and Association and Association and Association an			
8: List Certain Financial Accounts	. Instruments, Safe Deposit	Boxes, and Storage	Units	
Vithin 1 year before you filed for bankrupt	cy were any financial accounts o	r instruments held in	your name, or for your	benefit,
anluda ahaaking savings money market.	or other financial accounts; certi	ficates of deposit; sha	res in banks, credit un	ions,
rokerage houses, pension funds, coopera	atives, associations, and other fir	ancial institutions.		
No				
Yes. Fill in the details.				
	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance before closing or transfe
			or transferred	
				ф
Name of Financial Institution	XXXX	Checking		\$
Number Street		Savings		
Number Cases		Money market		
		☐ Brokerage		
City State ZIP Code		☐ Other		
	xxxx	☐ Checking	-	\$
Name of Financial Institution		Savings		
		Money market		
N Chroot	,			
Number Street		Brokerage		
Number Street				
City State ZIP Code		☐ Other		
City State ZIP Code	1 vear before you filed for bankru	☐ Other	box or other depositor	ry for
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City State ZIP Code Do you now have, or did you have within a securities, cash, or other valuables? No Yes. Fill in the details.	Who else had access to it?	Other		Do you s'have it?
City State ZIP Code Do you now have, or did you have within a securities, cash, or other valuables? M No Yes. Fill in the details.	Who else had access to it?	Other		Do you s have it?

First Name	Middle Name	HOFFMAN
1 1		

Number Street Number Street Number Street Number Street	Yes. Fill in the details.	Who else has or had access to it?	Describe the contents	Do you sti have it?
Name of Storage Facility Number Street				□ No
City State ZiP Code	Name of Storage Facility	Name		☐ Yes
Identify Property You Hold or Control for Someone Else	Number Street	Number Street		
Identify Property You Hold or Control for Someone Else Identify Property You Hold or Control for Someone Else In your In trust for someone.		City State ZIP Code		
No you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, it hold furnish frust for someone. No yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Street Number Street Number Street City State ZIP Code **10: Give Details About Environmental Information the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Side means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Doort all notices, releases, and proceedings that you know about, regardless of when they occurred. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes, Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Number Street Number Street	City State ZIP Cod	de		
Value Number Street Num				
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Where is the property? Describe the property	./			
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Number Street Number Street Number Street Number Street		Where is the property?	Describe the property	
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Case number (if known)_	

No			
Yes. Fill in the details.	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	_	
Number Street	Number Street		
	City State ZIP Code	·	
	<u> </u>		
City	P Code	A LL O Include actions	to and orders
re you been a party in any judic	ial or administrative proceeding under a	any environmental law? Include settlemen	is and orders.
No			
Yes. Fill in the details.	Court or agency	Nature of the case	Status of the case
O tidle			☐ Pending
Case title	Court Name		On appea
			☐ Conclude
	Number Street		
	Number Street		AND
thin A years before you filed for	City State ZIP	r have any of the following connections to	any business?
III: Give Details About Yethin 4 years before you filed for A sole proprietor or self-er A member of a limited liab	City State ZIP four Business or Connections to A r bankruptcy, did you own a business o mployed in a trade, profession, or other sility company (LLC) or limited liability p	ny Business r have any of the following connections to activity, either full-time or part-time	any business?
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Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Describe the nature of the business Describe the nature of the business Do not include Social Security number or EIN:			Full wald will be the number
Name of accountant or bookkeeper Dates business existed From To Ithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial studency, creditors, or other parties. No Yes. Fill in the details below. Date issued		Describe the nature of the business	Do not include Social Security number or ITIN
Tithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial statements, creditors, or other parties. No Yes. Fill in the details below. Date issued Number Street City State ZIP Code Number street Linderstand that making a false statement, concealing property, or obtaining money or property by in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Signature of Deptor 1 Date Linderstand Date Signature of Deptor 2 Date Date Date Signature of Deptor 1 Signature of Deptor 2 Date Date Date Linderstand pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	Business Name		EIN:
ithin 2 years before you filed for bankruptcy, dild you give a financial statement to anyone about your business? Include all financial stitutions, creditors, or other parties. No I Yes. Fill in the details below. Date issued Name Number Street City State ZIP Code The City State ZIP Code State Dily Code The City State Di	Number Street	Name of accountant or bookkeeper	Dates business existed
No Name Date issued Name Number Street City State ZIP Code Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Signature of Debtor 1 Date No	City State ZIP Code		From To
Name Name Number Street City State ZIP Code Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Is U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Date Date Date Date Date Date Date Date	ithin 2 years before you filed for bankru	ptcy, did you give a financial statement to a	nyone about your business? Include all financial
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Number Street City State ZIP Code I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Is U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)?	res. Fill III the details below.	Date issued	
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Signature of Debtor 2 Date	1	•	
Date Date Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No		· · · · · · · · · · · · · · · · · · ·	
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No	Signature of Debtor 1		
□ No	Signature of Debtor 1		
☐ Yes	Pate 10/7/2023	Date	nls Filing for Bankruptcy (Official Form 107)?
	Date 10/1/2023 Did you attach additional pages to Your	Date	ols Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	Date 16 17 100 3 Did you attach additional pages to Your	Date	nls Filing for Bankruptcy (Official Form 107)?
Yes. Name of person Attach the Bankruptcy Petition Preparer's No.	Date D112023 Did you attach additional pages to Your No Yes Did you pay or agree to pay someone w	Date Statement of Financial Affairs for Individua tho is not an attorney to help you fill out bar	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this info	rmation to identify y	our case:	
Debtor 1	AUNU Irgit Name	Middle Name	Hoffman
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Ba	ankruptcy Court for the: _	Distric	t of
Case number _ (If known)			

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
	NOT an atterney to bein you fill out bankruntey forms?
Did you pay or agree to pay someone who is	NOT an attorney to help you fill out bankruptcy forms?
≝ No	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
Yes. Name of person	Signature (Official Form 119).
	Signature (Official Form 110).
Under penalty of perjury, I declare that I have	read the summary and schedules filed with this declaration and
that they are true and correct.	
\sim $-$	
10/1	x
X	
Signature of Debtor 1	Signature of Debtor 2
Pro107/2023	Date
Date MM / DD / YYYY	MM / DD / YYYY